

Clay County Missouri

2017 Amusement Application

Pursuant to the County Ordinance 2016-ORD-22a

Phone: (816) 407-3570 FAX: (816) 407-3581 Email: clerk@claycountymo.gov

Application and Payment Due: <u>January 1, 2017</u>
License effective January 1, 2017 - December 31, 2017

Corporate Info: Corporate Name: Contact Name:		Business Locat	Business Location: DBA Name:			
		DBA Name:				
		Physical Address:	Physical Address:			
Corporate/Mai	ling Address:					
Phone:	Fax:	Email:				
Select One:	Business Distributor					
Item	Description		Qty	Rate	Amount	
199	County Clerk Administrative Fee		1	\$3.00	\$3.00	
				Total: \$	S	
Initial h	ere if the business does not require	e an Amusement License as define	ed by Ordi	inance 20	016-ORD-22a.	
Instructions: 1. Fill out con 2. Choose ite 3. Payment con	-	ist that pertain to the business and fill o	·			
I, knowing that	false statements on this form are punish	nable by law, verify that all information	above is tru	ie and acc	urate.	
Print Name:	S	Signature:		Date:		